

ELECTRICIAN'S LICENSE APPLICATION

MASTER AND MASTER LIMITED

All information listed below must be stated completely. Please print clearly.

1. BUSINESS

Name _____ Telephone _____

Address _____ Suite Number _____

City _____ State _____ Zip Code _____

2. MASTER ELECTRICIAN

Name _____ Telephone _____

Address _____ Suite Number _____

City _____ State _____ Zip Code _____

3. BONDING AGENCY

Name _____ Telephone _____

4. SUBMISSION REQUIREMENTS

- ☐ Proof of a current Maryland State Electrician License, or
☐ Proof of current Maryland State Master's Limited License

I hereby certify that I have read and examined this application and that all statements are true and correct. All provisions of law and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a license does not presume to give authority to violate or cancel the provisions of any other state law, or national electrical code regulating the use of electricity or the performance of electrical installations.

Signature _____ Date _____

(Master/Master Limited Electrician)

FOR OFFICE USE ONLY

LICENSE NUMBER _____ RECEIPT NUMBER _____

DATE OF ISSUANCE _____ EXPIRATION DATE _____

ADMINISTRATIVE APPROVAL _____